

AUTOCLAVE TRAINING RECORD

Autoclave Location: Building / Room _____

Autoclave Model & Make _____

Contact Person _____

	DATE					
	TRAINER					
	TRAINEE					
	TRAINEE LAB #					
TOPICS TO COVER (✓)	Work Flow					
	PPE and Safety					
	Preparing items for sterilizing					
	Preparing items for Decon					
	Cycle choices: Liquids					
	Cycle choices: Solids					
	Cycle choices: Prevac					
	Loading Autoclave					
	Autoclave Operation					
	Unloading Autoclave					
	Disposal of Decon waste					